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ATTACHMENT 3.1-A
Page 9
OMB No.: 0938-

State/Territory: Puerto Rico

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

24. Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary.

a. Transportation.

☒ Provided: ☐ No limitations ☒ With limitations*

☐ Not provided.

b. Services of Christian Science nurses.

☐ Provided: ☐ No limitations ☐ With limitations*

☒ Not provided.

c. Care and services provided in Christian Science sanatoria.

☐ Provided: ☐ No limitations ☐ With limitations*

☒ Not provided.

d. Nursing facility services for patients under 21 years of age.

☐ Provided: ☐ No limitations ☐ With limitations*

☒ Not provided.

e. Emergency hospital services.

☒ Provided: ☐ No limitations ☐ With limitations*

☐ Not provided.

f. Personal care services in recipient's home, prescribed in accordance with a plan of treatment and provided by a qualified person under supervision of a registered nurse.

☐ Provided: ☐ No limitations ☐ With limitations*

☒ Not provided.

*Description provided on attachment.

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TN No. 88-1

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State: PUERTO RICO

AMOUNT, DURATION, AND SCOPE OF MEDICAL
AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

25. Home and Community Care for Functionally Disabled Elderly Individuals,
as defined, described and limited in Supplement 2 to Attachment 3.1-A,
and Appendices A-G to Supplement 2 to Attachment 3.1-A.

 provided X not provided

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Puerto Rico

CASE MANAGEMENT SERVICES ARE NOT PROVIDED

A. Target Group:

B. Areas of State in which services will be provided:

☒ Entire State.

☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services

☒ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☐ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services:

E. Qualification of Providers:

TN No. 58-1
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TN No. New

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State/Territory: Puerto Rico

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE Commonwealth of Puerto Rico

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Amount, Duration, and Scope of Medical and Remedial Care and Services Provided.

Description of Limitation

1. Inpatient hospital services.

Limited to services provided in public health facilities including contract facilities.

2a. Outpatient hospital services.

Limited to services provided in public health facilities including contract facilities.

2b. Rural health clinic services.

Limited to services provided in public health facilities.

2c. Federally Qualified Health Care Centers

Limited to services provided in public facilities.

3. Other laboratory and X-Ray Services.

Limited to services provided in public health facilities including contract facilities.

4a. Skilled nursing facility services.

Provided in public health facilities. No FFP claimed.

4b. EPSDT

Available only in public health facilities including contract hospitals.

4c. Family Planning Services

Services available in public facilities including contract hospitals. No FFP claimed.

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Supersedes TN 84-3 Effective Date APR 01 1990

5. Physician's Services

Available only in public facilities including contract facilities.

6d. Social work, physical and occupational therapy, nursing and other similar services.

Provided only in public facilities including contract facilities.

7. Home Health Services

a. Intermittent or part time nursing services provided through public facilities including contract facilities.

b. Limited home health aids services-provided through a few home health agencies.

c. Medical supplies, equipment, etc. Provided on a limited basis by home Health Agencies or Public Health Nurse as need.

No Federal Financial Participation is currently claimed for home health services.

9. Clinic Services

Limited to services provided in public facilities including contract facilities.

10. Dental Services

Limited to services provided in public facilities including contract facilities.

11. Physical therapy and related services

a. Physical therapy-limited to services provided in certain public facilities including certain contract facilities.

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- b- Occupational therapy-Limited to services provided in certain public facilities including certain contract facilities.
- c- Speech, hearing, and related services - Limited to services provided in certain public facilities including certain contract facilities.

12. Prescribed drugs, etc.

- a- Prescribed drugs - Limited to drugs dispensed through pharmacies of publicly operated facilities including contract hospitals.

13. (a-b-c-d)

Other diagnostic services, etc.

Limited to services provided in public facilities including contract facilities.

18. Any other medical care, etc.

- a- Transportation - Limited to ambulance service provided by public facilities including contract facilities and automobiles and other means of transportation provided by the municipalities and the Department of Social Services.

- e) Emergency hospital services -

Limited to services, provided on an outpatient emergency basis in public facilities including contract facilities.

19.(a & b) Extended services to pregnant women.

Limited to services provided in public facilities.

*See approval letter
PR 87-1*

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TN # 84-3

supersedes

TN # 84-8

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